

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	4-27-01
FORMALITY REVIEW	84	827	5-5-01
RESPONSE FORMALITY REVIEW	A M	JC 580	06-05-01

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	6/1/04
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16	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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